

REMARKS

Claims 1 - 42 are withdrawn from consideration. Claims 43 - 52, 55 and 56 have been amended. Reexamination and reconsideration of the application, as amended, are respectfully requested.

Claims 43 - 51 were rejected under 35 U.S.C. 112, second paragraph, as being indefinite for failing to particularly point out and distinctly claim the subject matter which applicant regards as the invention. The Examiner stated:

Regarding claim 43, the sub-label letters of the method steps, "a" through "i", are not in sequence such that letters "b" and "f" are missing. Thus, it is unclearly whether there are missing steps or not.

Claims 44 - 51 are also rejected because of depending on claim 43 containing the same deficiency.

Regarding claims 44 and 48, the term "any" render the claim vague and indefinite because the term does not positively identify the claimed limitation.

This rejection is respectfully traversed with respect to claims 43 - 51, as amended. Claims 43 - 51 have been amended to eliminate the use of sub-label letters. Claims 44 and 48 have been amended to eliminate use of the term "any." It is therefore respectfully submitted that claims 43 - 51, as amended, are in compliance with 35 U.S.C. 112, second paragraph, and are in condition for allowance.

Claims 43 - 55 were rejected under 35 U.S.C. 103(a) as being unpatentable over Bro (USP 6,249,809) in view of Trusheim (USP 6,385,589). The Examiner stated:

Regarding claim 43, Bro discloses an interactive system for providing one or more individuals information to a health care worker (abstract) comprising the steps of providing the health care worker with a user device (i.e., 26, 52, 60, 68 or 68), the user device being communicatively linked to a system, i.e., remote central server, via a device adapter (i.e., 72 or 80) by a management surface interface, the system comprising applicants for controlling one or more electronic tools within the system in order to perform a desired information and one or more information source, i.e., database, for processing and storing medical information, connecting the health care worker to the remote central server by the device adapter, providing the health worker with one or more requests, i.e., menus, for medical information by sending the requests to the user device through an interactive message interface, entering the requested information by the health care worker in a way of the user device communicatively linked to the device adapter, forwarding the requested information a reporting tool for processing and transferring from the reporting tool to the information source (figures 5A-5B, col. 3 line 10 through col. 5 line 41 and col. 7 line 40 through col. 10

line 55). Bro differs from the claimed invention in not specifically teaching the system comprising the reporting tool for processing the request medical information in a predetermined formatted and processing the requested information in the desired format. However, Trusheim teaches a system for managing the health care information comprising a translator for translating source data files in a predetermined format and passing the processed information to a database so that the system is flexible and tolerant of change of information flow (col. 8 lines 1-62 and col. 9 line 56 through col. 10 line 15). Therefore, it would have been obvious to a person of ordinary skill in the art at the time the invention was made to modify Bro in for processing the request medical information in a predetermined formatted and processing the requested information in the desired format, as per teaching of Trusheim, because it makes flexible and tolerant of change of information flow to the system.

This rejection is respectfully traversed with respect to claims 43 - 55, as amended.

The present invention, as defined by amended claims 43 - 55, is directed to a method or system comprising a number of elements in combination. The claimed combination includes a collaboration tool. The claimed collaboration tool is configured to enable one-to-one, one-to-many, many-to-one and many-to-many communications and collaborations among the one or more health care workers. As explained in the present application, the present invention (in a preferred embodiment) overcomes the drawbacks of several prior art systems by combining voice and data based systems to provide an elaborate and efficient information processing system which allows one-to-one, one-to-many, many-to-one and many-to-many communications and collaborations. This is accomplished, in a preferred embodiment of the present invention, by providing a combination including a collaboration tool, one example of which is described in the present application as element 166. A similar combination of elements, including a collaboration tool configured to enable one-to-one, one-to-many, many-to-one and many-to-many communications and collaborations among the one or more health care workers, is neither disclosed nor suggested in either of the cited references, viewed alone or in combination. It is therefore respectfully submitted that claims 43 - 55, as amended, are patentable over Bro (USP 6,249,809) and Trusheim (USP 6,385,589), viewed alone or in combination.

Claim 56 was rejected under 35 U.S.C. 103(a) as being unpatentable over Trusheim (USP 6,385,589). The Examiner stated:

Regarding claim 56, Trusheim discloses a method for managing information comprising the steps of providing a medical survey to one or more health care workers, presenting the survey by a way of a presenting interface being communicatively linked to a

device adapter to a system through an information bus (34), and forwarding the survey to one or more health workers (figure 3, col. 7 line 52 through col. 8 line 67 and col. 20 lines 15-63). In addition, Trusheim also teaches to provide a telemetry tool for identifying the location of one or more health care workers, for displaying the location(s) and for acquiring a medical report by clicking a particular icon on a display (figures 33-34, col. 22 lines 41-53 and col. 24 lines 8-52). Although Trusheim does not specifically teach to create a map for identifying the location, it is notoriously well known in the art of programming graphic user interface, i.e., creating locations as map format, in order to make user friendly. Therefore, it would have been obvious to a person of ordinary skill in the art at the time the invention was made to modify Trusheim in displaying the MAP for identifying the location of the one or more health care workers instead of display text information in order to make user friendly.

This rejection is respectfully traversed.

It is respectfully submitted that the Examiner has not established a prima facie case of obviousness under 35 U.S.C. §103. A prima facie case of obviousness under 35 U.S.C. §103 is established when the teachings from the prior art itself appear to suggest the claimed subject matter to a person of ordinary skill in the art. In re Rijckaert 9 F.3d 1531, 28 USPQ2d 1955 (Fed. Cir. 1993); In re Bell, 991 F.2d 781, 782, 26 USPQ2d 1529, 1531 (Fed. Cir. 1993); In re Rinehart, 531 F.2d 1048, 1051, 189 USPQ 143, 147 (CCPA 1976)). The Examiner bears the initial burden of presenting a prima facie case of obviousness. In re Oetiker, 977 F.2d 1443, 1445, 24 USPQ2d 1443, 1444 (Fed. Cir. 1992). If the Examiner fails to meet that burden, then a rejection for obviousness is improper. In re Fine, 837 F.2d 1071, 1074, 5 USPQ2d 1596, 1598 (Fed. Cir. 1988).

There is no teaching or suggestion in Trusheim of a telemetry tool capable of creating a map which identifies the location of one or more health care workers as the workers access the system, as defined in claim 56. There is no teaching or suggestion in Trusheim of means for displaying such a telemetry originated map through a presentation interface, as defined by claim 56. There is no teaching or suggestion in Trusheim of means for clicking on a particular location on the telemetry based map to acquire a medical report for the area identified on the map, as defined in claim 56. The unsupported assertion that it is notoriously well known in the art to create locations as a map format does not constitute a prior art disclosure of the elements recited in the claim. The unsupported assertion is not sufficient to establish a prima facie case of obviousness. In re Rijckaert 9 F.3d 1531, 28 USPQ2d 1955 (Fed. Cir. 1993). If the Examiner asserts an explicit or implicit teaching or suggestion in the prior art, then the Examiner must indicate where such teaching or

suggestion appears in the prior art itself. In re Rijckaert 9 F.3d 1531, 28 USPQ2d 1955 (Fed. Cir. 1993); In re Yates, 663 F.2d 1054, 211 USPQ 1149, 1151 (CCPA 1981).


In the present case, there is no teaching or suggestion of the claimed invention in Trusheim itself, nor is there any indication in any cited reference that the following claimed features were well known in the art: a telemetry tool capable of creating a map which identifies the location of one or more health care workers as the workers access the system; means for displaying such a telemetry originated map through a presentation interface; means for clicking on a particular location on the telemetry based map to acquire a medical report for the area identified on the map. The Trusheim reference alone therefore fails to provide the basis for a prima facie case of obviousness, and in the absence of a prima facie case the rejection for obviousness is improper.

In view of the above, each of the presently pending claims in this application is believed to be in immediate condition for allowance. Accordingly, the Examiner is respectfully requested to withdraw the outstanding rejection of the claims and to pass this application to issue.

In the event that the transmittal letter is separated from this document and the Patent Office determines that an extension and/or other relief is required, Applicant(s) petition(s) for any required relief including extensions of time and authorizes the Commissioner to charge the cost of such petitions and/or other fees due in connection with the filing of this document to **Deposit Account No. 03-1952** referencing docket no. 533902000100.

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Respectfully submitted,

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